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RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2858

Docket No.: 1075.1185

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Takahisa HIRAIDE

Serial No. 10/000,089

Group Art Unit: 2133

Confirmation No. 8026

Filed: December 4, 2001

Examiner: John P. Trimmings

For: TESTING APPARATUS AND TESTING METHOD FOR AN INTEGRATED CIRCUIT,
AND INTEGRATED CIRCUIT

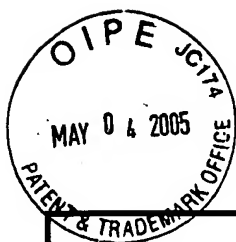
AMENDMENT AFTER FINAL

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment is being filed in response to the Office Action mailed January 6, 2005.

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.



S&H Form: (02/05)

**REPLY/AMENDMENT
FEE TRANSMITTAL**

Attorney Docket No.	1075.1185
Application Number	10/000,089
Filing Date	December 4, 2001
First Named Inventor	Takahisa HIRAIDE
Group Art Unit	2133

AMOUNT ENCLOSED	120.00	Examiner Name	John P. Trimmings
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FEE CALCULATION (fees effective 12/08/04)

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	29	- 33 =	0	X \$ 50.00 =	\$ 0.00
INDEPENDENT CLAIMS	7	- 7 =	0	X \$ 200.00 =	0.00

Since an Official Action set an original due date of April 6, 2005, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160));

If Notice of Appeal is enclosed, add (\$500.00)

If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)

Information Disclosure Statement (Rule 1.17(p)) (\$180.00)

Total of above Calculations = \$ 120.00

Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)

TOTAL FEES DUE = \$ 120.00

(1) If entry (1) is less than entry (2), entry (3) is "0".

(2) If entry (2) is less than 20, change entry (2) to "20".

(4) If entry (4) is less than entry (5), entry (6) is "0".

(5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT

- ☒ Check enclosed as payment.
- ☐ Charge "TOTAL FEES DUE" to the Deposit Account No. below.
- ☐ No payment is enclosed.

The PTO did not receive the following listed item(s) A check in the amount of \$120.

GENERAL AUTHORIZATION

- ☒ If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:

Deposit Account No.

19-3935

Deposit Account Name

STAAS & HALSEY LLP

- ☒ The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

SUBMITTED BY: STAAS & HALSEY LLP

Typed Name Regina D. Lucas

Reg. No. 46,883

Signature

Date

4 May 05

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